

MAY 2 2004  
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10605243

PTO/SB/06 (08-00)  
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<b>PATENT APPLICATION FEE DETERMINATION RECORD</b>	Application or Docket Number <b>28679/05404</b>
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CLAIMS AS FILED - PART I				SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA		RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))					\$			\$ 750	
TOTAL CLAIMS (37 CFR 1.16(c))	16	minus 20 = *	0	x \$			x \$ 18	= 0	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	2	minus 3 = *	0	x			x 84	= 0	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+			+		
				TOTAL			TOTAL	750	

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II						SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
AMENDMENT A	(Column 1)	(Column 2)	(Column 3)	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE		
	CLAIMS REMAINING AFTER AMENDMENT										
	Total (37 CFR 1.16(c))	* 16	Minus	** 20	= 0	x \$		x \$ 18	= 0		
	Independent (37 CFR 1.16(b))	* 3	Minus	*** 3	= 0	x		x 0	= 0		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+		+			
						TOTAL		TOTAL	0		

10/12/04

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
	CLAIMS REMAINING AFTER AMENDMENT								
	Total (37 CFR 1.16(c))	* 13	Minus	** 20	= 0	x \$		x \$	= 0
	Independent (37 CFR 1.16(b))	* 4	Minus	*** 3	= 1	x		x 88	= 88.00
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+		+	
						TOTAL		TOTAL	0

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
	CLAIMS REMAINING AFTER AMENDMENT								
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$		x \$	=
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	0	x	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+		+	
						TOTAL		TOTAL	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.  
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